

<i>SERFF Tracking Number:</i>	<i>STAT-125313537</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Auto National Insurance Company</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-026364</i>
<i>Company Tracking Number:</i>	<i>SAN-AU-2007-1035</i>		
<i>TOI:</i>	<i>19.0 Personal Auto</i>	<i>Sub-TOI:</i>	<i>19.0001 Private Passenger Auto (PPA)</i>
<i>Product Name:</i>	<i>Arkansas NSA FM</i>		
<i>Project Name/Number:</i>	<i>Forms eff 01-01-08/SAN-AU-2007-1035</i>		

Filing at a Glance

Company: State Auto National Insurance Company

Product Name: Arkansas NSA FM

SERFF Tr Num: STAT-125313537

State: Arkansas

TOI: 19.0 Personal Auto

SERFF Status: Closed

State Tr Num: AR-PC-07-026364

Sub-TOI: 19.0001 Private Passenger Auto
(PPA)

Co Tr Num: SAN-AU-2007-1035

State Status:

Filing Type: Form

Co Status:

Reviewer(s): Alexa Grissom, Betty
Montesi, Brittany Yielding

Authors: Doug Griffith, Amanda
Zalipski

Disposition Date: 10/09/2007

Date Submitted: 10/08/2007

Disposition Status: Approved

Effective Date Requested (New): 01/01/2008

Effective Date (New): 01/01/2008

Effective Date Requested (Renewal): 01/01/2008

Effective Date (Renewal):

General Information

Project Name: Forms eff 01-01-08

Status of Filing in Domicile:

Project Number: SAN-AU-2007-1035

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 10/09/2007

State Status Changed: 10/08/2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

State Auto National Insurance Company submits this filing of a revision to its insurance identification card to our Non-Standard Auto Insurance Program, as detailed below, for your review.

We have revised the Arkansas Insurance Identification Card to comply with SB 88, and the words "Excluded Driver" will appear on the front of the identification card, when the policy has an excluded driver.

Company and Contact

Filing Contact Information

SERFF Tracking Number: STAT-125313537 State: Arkansas
Filing Company: State Auto National Insurance Company State Tracking Number: AR-PC-07-026364
Company Tracking Number: SAN-AU-2007-1035
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Arkansas NSA FM
Project Name/Number: Forms eff 01-01-08/SAN-AU-2007-1035

Doug Griffith, Supervisor, State Filings doug.griffith@stateauto.com
518 E. Broad Street (614) 917-5492 [Phone]
Columbus, OH 43215 (614) 887-1615[FAX]

Filing Company Information

State Auto National Insurance Company CoCode: 19530 State of Domicile: Ohio
518 E. Broad Street Group Code: 175 Company Type: Property and
Casualty

PO Box 182822
Columbus, OH 43215 Group Name: State ID Number:
(614) 464-5000 ext. [Phone] FEIN Number: 31-1334827

SERFF Tracking Number:	STAT-125313537	State:	Arkansas
Filing Company:	State Auto National Insurance Company	State Tracking Number:	AR-PC-07-026364
Company Tracking Number:	SAN-AU-2007-1035		
TOI:	19.0 Personal Auto	Sub-TOI:	19.0001 Private Passenger Auto (PPA)
Product Name:	Arkansas NSA FM		
Project Name/Number:	Forms eff 01-01-08/SAN-AU-2007-1035		

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50.00 per filing
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Auto National Insurance Company	\$50.00	10/08/2007	15996780

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<i>Project Name/Number:</i>	<i>Forms eff 01-01-08/SAN-AU-2007-1035</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Alexa Grissom	10/09/2007	10/09/2007

<i>SERFF Tracking Number:</i>	<i>STAT-125313537</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Auto National Insurance Company</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-026364</i>
<i>Company Tracking Number:</i>	<i>SAN-AU-2007-1035</i>		
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<i>Product Name:</i>	<i>Arkansas NSA FM</i>		
<i>Project Name/Number:</i>	<i>Forms eff 01-01-08/SAN-AU-2007-1035</i>		

Disposition

Disposition Date: 10/09/2007
Effective Date (New): 01/01/2008
Effective Date (Renewal):
Status: Approved
Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: STAT-125313537 State: Arkansas
Filing Company: State Auto National Insurance Company State Tracking Number: AR-PC-07-026364
Company Tracking Number: SAN-AU-2007-1035
TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)
Product Name: Arkansas NSA FM
Project Name/Number: Forms eff 01-01-08/SAN-AU-2007-1035

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	Arkansas Insurance Identification Card	Approved	Yes

SERFF Tracking Number:	STAT-125313537	State:	Arkansas
Filing Company:	State Auto National Insurance Company	State Tracking Number:	AR-PC-07-026364
Company Tracking Number:	SAN-AU-2007-1035		
TOI:	19.0 Personal Auto	Sub-TOI:	19.0001 Private Passenger Auto (PPA)
Product Name:	Arkansas NSA FM		
Project Name/Number:	Forms eff 01-01-08/SAN-AU-2007-1035		

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type	Action	Action Specific Data	Readability	Attachment
Approved	Arkansas Insurance Identification Card	Idfovar	0602	Other	New		0.00	Arkansas Insurance Identification Card.pdf

KEEP THIS CARD IN YOUR VEHICLE AT ALL TIMES
AS YOU MAY BE ASKED TO PRESENT UPON DEMAND
Most States require drivers to show proof of insurance
when stopped by a law enforcement officer.

REPORT ALL ACCIDENTS IMMEDIATELY
Claims can be reported to your State Auto agent
or our Claims Contact Center.

STATE AUTO CLAIMS CONTACT CENTER
24 hours a day, seven days a week
1-800-766-1853
Have your policy number handy when you call.

If you have an auto glass claim, dial the
State Auto Glass Service direct at 1-888-504-4527.

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<i>Project Name/Number:</i>	<i>Forms eff 01-01-08/SAN-AU-2007-1035</i>		

Rate Information

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>STAT-125313537</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Auto National Insurance Company</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-026364</i>
<i>Company Tracking Number:</i>	<i>SAN-AU-2007-1035</i>		
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<i>Product Name:</i>	<i>Arkansas NSA FM</i>		
<i>Project Name/Number:</i>	<i>Forms eff 01-01-08/SAN-AU-2007-1035</i>		

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Approved	10/09/2007
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Comments:

Attachment:

AR NSA FM Transmittal.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

3. Group Name	State Auto Insurance Companies				Group NAIC #	175
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #		
State Auto National Insurance Company	OH	19530	31-1334827			

5. Company Tracking Number	SAN-AU-2007-1035
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Doug Griffith 518 E. Broad Street Columbus, OH 43215	Supervisor, State Filings	800.695.9436 (ext. 5492)	614.887.1615	doug.griffith@stateauto.com
7. Signature of authorized filer				
8. Please print name of authorized filer		Doug Griffith		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	19.0 Personal Auto
10. Sub-Type of Insurance (Sub-TOI)	19.0001 Private Passenger Auto (PPA)
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Non-Standard Auto
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: January 01, 2008 Renewal: January 01, 2008
15. Reference Filing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	October 3, 2007
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	SAN-AU-2007-1035
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

We have revised the Arkansas Insurance Identification Card to comply with SB 88, and the words "Excluded Driver" will appear on the front of the identification card, when the policy has an excluded driver.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<div data-bbox="116 1451 376 1524"> <p>Check #: EFT</p> <p>Amount: \$50.00</p> </div> <div data-bbox="87 1776 1505 1858"> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p> </div>	

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)